

**MENASHA HEALTH DEPARTMENT - RESTAURANT / RETAIL FOOD SERVICE INSPECTION REPORT**

Business Name <b>Dollar General</b>		Business Address 1135 Appleton Road		County <b>Winnebago</b>	ID # <b>55-24060</b>
Legal Licensee <b>Dollar General Corp, LLC</b>		Mailing Address (Licensee) 100 Mission Ridge TN		Telephone # (920 ) -	
Date of inspection <b>7/8/13</b>	Bare Hand Contact Plan in Place <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Type of Establishment <input type="checkbox"/> Restaurant <input checked="" type="checkbox"/> Retail	Is operator Certified <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> pending <input checked="" type="checkbox"/> N/A	
<b>Inspection Type</b> <input type="checkbox"/> pre-inspection <input checked="" type="checkbox"/> routine inspection <input type="checkbox"/> Re-inspection <input type="checkbox"/> Complaint <input type="checkbox"/> Downtime <input type="checkbox"/> Non inspection visit			<b>Action Taken</b> <input checked="" type="checkbox"/> Operational <input type="checkbox"/> Conditional Permit 30 days <input type="checkbox"/> Withhold Permit <input type="checkbox"/> License suspended <input type="checkbox"/> License revoked <input type="checkbox"/> Other		
<b>Person in Charge</b>			<b>CFM # and expiration</b> <b>CFM #</b> <b>expiration date</b>		

**FOODBORNE ILLNESS RISK FACTORS**

Circle designated compliance status for each item <b>IN</b> -in compliance <b>OUT</b> – out of compliance <b>N/O</b> – not observed <b>N/A</b> – not applicable	Mark an <b>X</b> in appropriate box for <b>COS</b> and/or <b>R</b> <b>COS</b> – corrected on site during inspection <b>R</b> - repeat violation
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COMPLIANCE STATUS			COS	R	COMPLIANCE STATUS			COS	R
<b>DEMONSTRATION OF KNOWLEDGE</b>					<b>POTENTIALLY HAZARDOUS FOOD TEMPERATURE</b>				
1A	IN	Certified food manager, duties	<input type="checkbox"/>	<input type="checkbox"/>	16	NA	Proper cooking time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
1B	IN	Person in charge, ID knowledgeable, duties and responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	17	NA	Proper re-heating procedures for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
<b>EMPLOYEE HEALTH</b>					18	NA	Proper cooling time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
2	IN	Management awareness, policy present	<input type="checkbox"/>	<input type="checkbox"/>	19	NA	Proper hot holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
3	IN	Proper use of reporting, restriction and exclusion	<input type="checkbox"/>	<input type="checkbox"/>	20	IN	Proper cold holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
<b>GOOD HYGENIC PRATICES</b>					21	NA	Proper date marking and disposition	<input type="checkbox"/>	<input type="checkbox"/>
4	IN	Proper eating, tasting, drinking	<input type="checkbox"/>	<input type="checkbox"/>	22	NA	Time as a public health control; procedures and record	<input type="checkbox"/>	<input type="checkbox"/>
5	IN	No discharge from eyes, nose and mouth	<input type="checkbox"/>	<input type="checkbox"/>	<b>CONSUMER ADVISORY</b>				
<b>PREVENTING CONTAMINATION FROM HANDS</b>					23	NA	Consumer advisory supplied	<input type="checkbox"/>	<input type="checkbox"/>
6	IN	Hands cleaned and properly washed	<input type="checkbox"/>	<input type="checkbox"/>	<b>HIGHLY SUSEPTABLE POPULATIONS</b>				
7	NA	No bare hand contact or using approved plan	<input type="checkbox"/>	<input type="checkbox"/>	24	NA	Pasteurized foods used; prohibited foods not offered	<input type="checkbox"/>	<input type="checkbox"/>
8	IN	Adequate hand washing facilities supplied and accessible	<input type="checkbox"/>	<input type="checkbox"/>	<b>CHEMICAL</b>				
<b>APPROVED SOURCE</b>					25	NA	Food additives approved and properly use	<input type="checkbox"/>	<input type="checkbox"/>
9	IN	Food obtained from approved source	<input type="checkbox"/>	<input type="checkbox"/>	26	IN	Toxic substances properly identified, stored, used	<input type="checkbox"/>	<input type="checkbox"/>
10	IN	Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>	<b>CONFORMANCE WITH APPROVED PROCEDURES</b>				
11	IN	Food in good condition, safe, unadulterated	<input type="checkbox"/>	<input type="checkbox"/>	27	NA	Compliance with variance, specialized process, HACCP plan	<input type="checkbox"/>	<input type="checkbox"/>
12	NA	Records available, shell stock tags, parasite destruction	<input type="checkbox"/>	<input type="checkbox"/>	<b>Risk Factors:</b> are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illness or injury.  Risk factor violations should be corrected on site during the inspection unless there is some reason that correction cannot be immediately made.				
<b>PROTECTION FROM CONTAMINATION</b>									
13	IN	Food separated and protected	<input type="checkbox"/>	<input type="checkbox"/>					
14	IN	Food contact surfaces cleaned and sanitized	<input type="checkbox"/>	<input type="checkbox"/>					
15	IN	Proper disposition of returned, previously served, reconditioned & unsafe food	<input type="checkbox"/>	<input type="checkbox"/>					

GOOD RETAIL PRACTICES									
Good retail practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into food. Mark an X in box if item is not in compliance. Mark an X in appropriate box for COS/R. <b>COS</b> – corrected on site during inspection <b>R</b> - repeat violation									
<b>SAFE FOOD AND WATER</b>			<b>COS</b>	<b>R</b>	<b>PROPER USE OF UTENSILS</b>				
28	NA	Pasteurized eggs used where required	<input type="checkbox"/>	<input type="checkbox"/>	41	IN	In use utensils properly stored	<input type="checkbox"/>	<input type="checkbox"/>
29	IN	Water and ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>	42	IN	Utensils equipment and linen properly stored and used	<input type="checkbox"/>	<input type="checkbox"/>
30	NA	Variance obtained for specialized processing methods	<input type="checkbox"/>	<input type="checkbox"/>	43	IN	Single-use and Single service articles properly stored and used	<input type="checkbox"/>	<input type="checkbox"/>
<b>FOOD TEMPERATURE CONTROL</b>					<b>UTENSILS AND EQUIPMENT</b>				
31	IN	Proper cooling methods used; adequate equip. for temperature control.	<input type="checkbox"/>	<input type="checkbox"/>					
32	NA	Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>					
33	NA	Approved thawing methods used.	<input type="checkbox"/>	<input type="checkbox"/>					
34	OUT	Thermometers provided and accurate	<input type="checkbox"/>	<input type="checkbox"/>	44	NA	Gloves properly used	<input type="checkbox"/>	<input type="checkbox"/>
<b>FOOD PROTECTION</b>					<b>PHYSICAL FACILITIES</b>				
35	IN	Food properly labeled original container	<input type="checkbox"/>	<input type="checkbox"/>	45	IN	Food and nonfood contact surfaces; cleanable, properly designed, constructed and used	<input type="checkbox"/>	<input type="checkbox"/>
36	IN	Pests and animals not present, no unauthorized persons	<input type="checkbox"/>	<input type="checkbox"/>	46	IN	Warewash facilities; installed, maintained, and used	<input type="checkbox"/>	<input type="checkbox"/>
37	IN	Contamination prevented during food preparation storage and display	<input type="checkbox"/>	<input type="checkbox"/>	47	IN	Non-food contact surfaces clean	<input type="checkbox"/>	<input type="checkbox"/>
38	IN	Personal cleanliness, jewelry	<input type="checkbox"/>	<input type="checkbox"/>					
39	IN	Wiping cloths; properly used and stored	<input type="checkbox"/>	<input type="checkbox"/>					
40	NA	Plant food cooking for hot hold Washing all fruits and vegetables	<input type="checkbox"/>	<input type="checkbox"/>					
			<input type="checkbox"/>	<input type="checkbox"/>	48	IN	Hot and cold water available, under pressure	<input type="checkbox"/>	<input type="checkbox"/>
					49	IN	Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>
					50	IN	Sewage and wastewater properly disposed	<input type="checkbox"/>	<input type="checkbox"/>
					51	IN	Toilet facilities, properly constructed, supplied and clean	<input type="checkbox"/>	<input type="checkbox"/>
					52	IN	Garbage and refuse, properly disposed facilities and maintained	<input type="checkbox"/>	<input type="checkbox"/>
					53	IN	Physical facilities installed maintained and clean	<input type="checkbox"/>	<input type="checkbox"/>
					54	IN	Adequate ventilation and lighting, designed and used.	<input type="checkbox"/>	<input type="checkbox"/>

Menu Review:
Review Conducted
☒ yes
☐ no
- New menu items
☐ Yes
☒ No
New items

New processes:
Does new process require variance
☐yes
☐ no

What interim step was taken pending variance

Addition to Consumer Advisory
☐ yes
☐ no
New menu item which requires consumer advisory

Concerns / Corrections Suggested:

TEMPERATURES – Refrigeration/hot hold/cook					
Item / Location	Temp	Item / Location	Temp	Item / Location	Temp
upright refrigerator	36°F	Freezer	<10°F	--	°
--	°F	--	°	--	°
Cook --	°F	Cook --	°	Cook --	°

WAREWASHING INFORMATION					
Machine Name	Sanitization Method	Thermo Label confirmed	PPM/ temp	Sanitizer Name / Approved Y/N	Sanitizer Type
	other approved m	<input type="checkbox"/> yes <input type="checkbox"/> No	--ppm / °F rinse	<input type="checkbox"/> Yes <input type="checkbox"/> No	chlorine

**CDC Risk Code Factor Abbreviations and Violation by Category Numbers Table**  
 (Use this table to group CDC risk factor listed below with violation from page 1)

Unsafe Sources (US)	Inadequate Cooking (IC)	Improper Hold (IH)	Cross Contamination (CC)	Personal Hygiene (PH)	Other CDC Factors (O)
9	16	18	13	3	1A
10	17	19	14	4	1B
11		20	15	5	2
12		21		6	23
		22		7	24
				8	25
					26

For each violation sited, use above table and record CDC Risk Code Factor abbreviation (such as “US” or “IH”), violation number, list from the Wisconsin Food Code (WFC) the reference number that refers to the area in violation.

Record CDC risk code abbreviation, violation # from 1<sup>st</sup> page, violation description, Food Code reference, corrective action, and score.

CDC Code	Violation number	Description of violation, WFC Reference Number including code reference text / Corrective Action Required – Note date(s) of repeat violations on previous inspections.	Compliance Date/ Corrected on site (COS)
-		<p>WISCONSIN FOOD CODE REFERENCE</p> <p>CORRECTIVE ACTION</p>	--

Use this section for Good Retail Practice (GRP) Violations

Violation #	Description of violation, WFC Reference Number / Corrective Action Required	Compliance Date/ Corrected during inspection
34	<p>No thermometer was noted in the dairy cooler to monitor unit temperatures</p> <p><b>WISCONSIN FOOD CODE REFERENCE</b></p> <p>4-204.112      Temperature Measuring Devices.</p> <p>(A) In a mechanically refrigerated or hot FOOD storage unit, the sensor of a TEMPERATURE MEASURING DEVICE shall be located to measure the air temperature or a simulated product temperature in the warmest part of a</p>	immediate

	<p>mechanically refrigerated unit and in the coolest part of a hot FOOD storage unit.</p> <p>(B) Except as specified in ¶ (C) of this section, cold or hot holding EQUIPMENT used for POTENTIALLY HAZARDOUS FOOD shall be designed to include and shall be equipped with at least one integral or permanently affixed TEMPERATURE MEASURING DEVICE that is located to allow easy viewing of the device's temperature display.</p> <p>(C) Paragraph (B) of this section does not apply to EQUIPMENT for which the placement of a TEMPERATURE MEASURING DEVICE is not a practical means for measuring the ambient air surrounding the FOOD because of the design, type, and use of the EQUIPMENT, such as calrod units, heat lamps, cold plates, bainmaries, steam tables, insulated FOOD transport containers, and salad bars.</p> <p>(D) TEMPERATURE MEASURING DEVICES shall be designed to be easily readable.</p> <p>(E) FOOD TEMPERATURE MEASURING DEVICES and water TEMPERATURE MEASURING DEVICES on WAREWASHING machines shall have a numerical scale, printed record, or digital readout in increments no greater than 1oC or 2oF in the intended range of use.</p> <p><b>CORRECTIVE ACTION</b></p> <p>Place a thermometer in the warmest portion of the cooler to monitor temperatures. It is recommended to log the temperature of refrigeration units 1-2 times daily.</p>	
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#### Long term controls in place

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***Critical Violations which require greater than one re-inspection and/or repeated CDC Risk Factors violation(s) which are cited on 3 consecutive inspections shall result in the issuance of a re-inspection fee. Re-inspection fees are set based on the complexity of the establishment as follows:***

- ***Complex restaurants      \$250.00***
- ***Moderate restaurants    \$200.00***
- ***Simple restaurants        \$150.00***
- ***Retail >1 M                \$300.00***
- ***Retail 25K-1M              \$250.00***
- ***Retail remaining          \$200.00***

***Violations must be corrected by the compliance date, unless some arrangement has been made with Menasha Health Department. Re-inspection fees will be assessed to all CDC Risk Factor violations requiring more than (1) re-inspection or if the same CDC Risk Factor violation is cited on 3 consecutive inspections. Re-inspection fees will be billed to the owner of the establishment. Failure to pay re-inspection fee shall result in the following potential legal actions:***

- ***Temporary revocation of license***
- ***License will not be renewed pending payment***
- ***Enforcement conference with licensee or licensee representative which would require signed compliance agreement.***

***Operators who wish to challenge the assessment of a re-inspection fee shall submit in writing circumstances and reason that they feel the re-inspection fee should not have been assessed. This statement must be submitted to the Public Health Director. The issue will then be addressed by the City of Menasha Board of Health. Any violations and /or enforcement shall be complied with pending appeal.***

***The City of Menasha posts all Health Department Inspection reports on the City of Menasha Web-Site.***

***Inspection Narrative and information on non-violation observations and/or suggestions:***

I understand and agree to comply with the corrections ordered in this report. I understand the failure to comply could result in legal action including loss of license.

<b>PIC signature or authorized employee</b>	<b>Date</b>	<b>Sanitarian Signature Todd Drew, R.S.</b>	<b>Date</b>

**Food Safety Fact Sheets Attached:**

<input type="checkbox"/> Employee Health	<input type="checkbox"/> Employee Reporting Agreement	<input type="checkbox"/> Personal Hygiene	<input type="checkbox"/> Bare hand contact
<input type="checkbox"/> Responsibilities of the PIC	<input type="checkbox"/> Disposable glove use	<input type="checkbox"/> Cross – Contamination	<input type="checkbox"/> Demonstration of Knowledge
<input type="checkbox"/> Cooling Procedures	<input type="checkbox"/> Thawing Procedures	<input type="checkbox"/> Active Managerial Control	<input type="checkbox"/> Certified Food Manager
<input type="checkbox"/> Consumer Advisory	<input type="checkbox"/> HACCP	<input type="checkbox"/> HACCP Hazard Analysis	<input type="checkbox"/> Serving Safe Food
<input type="checkbox"/> Pre-Inspection	<input type="checkbox"/> Time as a Health Control	<input type="checkbox"/> Allergens	<input type="checkbox"/> Thermometer Calibration
<input type="checkbox"/> Catering	<input type="checkbox"/> Cooking Temperatures	<input type="checkbox"/> Microwave Cooking	<input type="checkbox"/> Interpreting the Inspection Report
<input type="checkbox"/> Variance / HACCP	<input type="checkbox"/> Frozen Foods	<input type="checkbox"/> Receiving	<input type="checkbox"/> Chemical / Physical Contamination
<input type="checkbox"/> Common Foodborne Illnesses	<input type="checkbox"/> Outdoor Events	<input type="checkbox"/> Serving Safe Food	<input type="checkbox"/> Effective Sanitizing
<input type="checkbox"/> Organizing Coolers	<input type="checkbox"/> Date Marking		